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PTO/SB/01 (12-97)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☒ Declaration Submitted with Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number IN01157K

First Named Inventor SAKSENA, et al

COMPLETE IF KNOWN

Application Number /

Filing Date July 19, 2001

Group Art Unit To Be Assigned

Examiner Name To Be Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NOVEL PEPTIDES AS NS3-SERINE PROTEASE INHIBITORS OF HEPATITIS C VIRUS

the specification of which ☒ is attached hereto **(Title of the Invention)**

☐ OR ☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (# applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

CERTIFICATE OF MAILING

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Typed or printed name

Signature

Date

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Date July 19, 2001

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 24265 OR ☐ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 24265 OR ☐ Correspondence address below

Name	PALAIYUR S. KALYANARAMAN			Reg. No.	34,634
Address					
Address					
City		State		ZIP	
Country		Telephone	(908) 298-5068	Fax	(908) 298-5388

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
ANIL K.		SAKSENA	
Inventor's Signature	<u>Anil K. Saksena</u>	Date	5/24/01
Residence: City	UPPER MONTCLAIR	State	NJ
Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	53 BEVERLY ROAD		
Post Office Address			
City	UPPER MONTCLAIR	State	NJ
ZIP	07043	Country	U.S.A.

☒ Additional inventors are being named on the 6 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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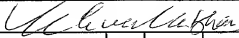
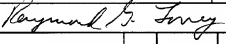
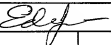
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 5

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
VIYYOOR MOOPIL				GIRJAVALLABHAN			
Inventor's Signature				Date		5/23/2019	
Residence: City		PARSIPPANY		State		NJ	
				Country		U.S.A.	
Post Office Address		10 MAPLEWOOD DRIVE					
Post Office Address							
City		PARSIPPANY		State		NJ	
				ZIP		07054	
				Country		U.S.A.	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
RAYMOND G.				LOVEY			
Inventor's Signature				Date		5/23/2019	
Residence: City		WEST CALDWELL		State		NJ	
				Country		U.S.A.	
Post Office Address		65 WOODSIDE AVENUE					
Post Office Address							
City		WEST CALDWELL		State		NJ	
				ZIP		07006	
				Country		U.S.A.	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
EDWIN				JAO			
Inventor's Signature				Date		5/23/2019	
Residence: City		WARREN		State		NJ	
				Country		U.S.A.	
Post Office Address		20 CROSSWOOD WAY					
Post Office Address							
City		WARREN		State		NJ	
				ZIP		07059	
				Country		U.S.A.	

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
FRANK				BENNETT			
Inventor's Signature	<i>Frank Bennett</i>					Date	5/23/01
Residence: City	PISCATAWAY	State	NJ	Country	U.S.A.	Citizenship	U.K.
Post Office Address 19 DRACO ROAD							
Post Office Address							
City	PISCATAWAY	State	NJ	ZIP	08854	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
JINPING L.				MC CORMICK			
Inventor's Signature	<i>Jinping L. Mc Cormick</i>					Date	6/8/01
Residence: City	EDISON	State	NJ	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 5 PACE DRIVE							
Post Office Address							
City	EDISON	State	NJ	ZIP	08820	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
HAIYAN				WANG			
Inventor's Signature						Date	
Residence: City	CRANBURY	State	NJ	Country	U.S.A.	Citizenship	CHINA
Post Office Address 5 CUBBERLY COURT							
Post Office Address							
City	CRANBURY	State	NJ	ZIP	08512	Country	U.S.A.

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
RUSSELL E.		PIKE			
Inventor's Signature	<i>Russell E. Pike</i>			Date	05/30/01
Residence: City	STANHOPE	State	NJ	Country	U.S.A.
Post Office Address	RD #1, 31 FLORENCE STREET				
Post Office Address					
City	STANHOPE	State	NJ	ZIP	07874
				Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
STEPHANE L.		BOGEN			
Inventor's Signature	<i>Stephane L. Bogen</i>			Date	05/25/01
Residence: City	SOMERSET	State	NJ	Country	U.S.A.
Post Office Address	13 DAHLIA ROAD				
Post Office Address					
City	SOMERSET	State	NJ	ZIP	08873
				Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
YI-TSUNG		LIU			
Inventor's Signature	<i>Yi Tsung Liu</i>			Date	5/31/01
Residence: City	MORRIS TOWNSHIP	State	NJ	Country	U.S.A.
Post Office Address	34 ALEXANDRIA ROAD				
Post Office Address					
City	MORRIS TOWNSHIP	State	NJ	ZIP	07960
				Country	U.S.A.

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
ASHOK		ARASAPPAN	
Inventor's Signature	<i>Ashok Arasappan</i>		Date 5/23/01
Residence: City	BRIDGEWATER	State NJ	Country U.S.A. Citizenship INDIA
Post Office Address 18 LARSEN COURT			
Post Office Address			
City	BRIDGEWATER	State NJ	ZIP 08807 Country U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
TEJAL		PAREKH	
Inventor's Signature			Date
Residence: City	MOUNTAIN VIEW	State CA	Country U.S.A. Citizenship INDIA
Post Office Address 1885 EDNAMARY WAY, UNIT C			
Post Office Address			
City	MOUNTAIN VIEW	State CA	ZIP 94040 Country U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
PATRICK A.		PINTO	
Inventor's Signature	<i>Patrick A. Pinto</i>		Date 5/23/01
Residence: City	MORRIS PLAINS	State NJ	Country U.S.A. Citizenship U.S.A.
Post Office Address 34 BATTLE RIDGE ROAD			
Post Office Address			
City	MORRIS PLAINS	State NJ	ZIP 07950 Country U.S.A.

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
F. GEORGE		NJORGE	
Inventor's Signature	<i>F. George George</i>		Date <i>05/30/01</i>
Residence: City	WARREN	State	NJ
		Country	U.S.A.
Post Office Address	11 SOFTWOOD WAY		
Post Office Address			
City	WARREN	State	NJ
		ZIP	07059
		Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
ASHIT K.		GANGULY	
Inventor's Signature	<i>Ashit K. Ganguly</i>		Date <i>5/22/01</i>
Residence: City	UPPER MONTCLAIR	State	NJ
		Country	U.S.A.
Post Office Address	96 COOPER AVENUE		
Post Office Address			
City	UPPER MONTCLAIR	State	NJ
		ZIP	07043
		Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			Date
Residence: City		State	
		Country	
Post Office Address			
Post Office Address			
City		State	
		ZIP	
		Country	

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
TERENCE K.				BRUNCK			
Inventor's Signature						Date	
Residence: City	SANTA FE	State	NM	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 5A CALLE SAN MARTIN							
Post Office Address							
City	SANTA FE	State	NM	ZIP	87501	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
SCOTT JEFFREY				KEMP			
Inventor's Signature						Date	
Residence: City	SAN DIEGO	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 7873 AVENIDA NAVIDAD #263							
Post Office Address							
City	SAN DIEGO	State	CA	ZIP	92122	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
ODILE ESTHER				LEVY			
Inventor's Signature						Date	
Residence: City	SAN DIEGO	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 5304 RUETTE DE MER							
Post Office Address							
City	SAN DIEGO	State	CA	ZIP	92130	Country	U.S.A.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u> 1 </u> of <u> 1 </u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
MARGUERITA				LIM-WILBY			
Inventor's Signature						Date	
Residence: City	LA JOLLA	State	CA	Country	U.S.A.	Citizenship	MALAYSI A
Post Office Address 6333 CASTENJON DRIVE							
Post Office Address							
City	LA JOLLA	State	CA	ZIP	92037	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

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Submitted
with Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number IN01157K

First Named Inventor SAKSENA, et al

COMPLETE IF KNOWN

Application Number /

Filing Date July 19, 2001

Group Art Unit To Be Assigned

Examiner Name To Be Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**NOVEL PEPTIDES AS NS3-SERINE PROTEASE INHIBITORS OF HEPATITIS
C VIRUS**

☒ the specification of which (Title of the Invention)

is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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Typed or printed name

Signature

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number 24265
OR
☐ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 24265 OR ☐ Correspondence address below

Name	PALAIYUR S. KALYANARAMAN			Reg. No.	34,634
Address					
Address					
City		State		ZIP	
Country	Telephone	(908) 298-5068		Fax	(908) 298-5388

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
ANIL K.		SAKSENA	
Inventor's Signature		Date	
Residence: City	UPPER MONTCLAIR	State	NJ
	Country	U.S.A.	Citizenship
Post Office Address	53 BEVERLEY ROAD		
Post Office Address			
City	UPPER MONTCLAIR	State	NJ
	ZIP	07043	Country
	U.S.A.		

☒ Additional inventors are being named on the 6 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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
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PTO/SB/02A (3-97)

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
ASHOK				ARASAPPAN			
Inventor's Signature						Date	
Residence: City	BRIDGEWATER	State	NJ	Country	U.S.A.	Citizenship	INDIA
Post Office Address 18 LARSEN COURT							
Post Office Address							
City	BRIDGEWATER	State	NJ	ZIP	08807	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
TEJAL				PAREKH			
Inventor's Signature						Date	7/12/01
Residence: City	MOUNTAIN VIEW	State	CA	Country	U.S.A.	Citizenship	INDIA
Post Office Address 1885 EDNAMARY WAY, UNIT C							
Post Office Address							
City	MOUNTAIN VIEW	State	CA	ZIP	94040	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
PATRICK A.				PINTO			
Inventor's Signature						Date	
Residence: City	MORRIS PLAINS	State	NJ	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 34 BATTLE RIDGE ROAD							
Post Office Address							
City	MORRIS PLAINS	State	NJ	ZIP	07950	Country	U.S.A.

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

F. GEORGE

NJOROGE

Inventor's
Signature

Date

Residence: City

WARREN

State

NJ

Country

U.S.A.

Citizenship

KENYA

Post Office Address

11 SOFTWOOD WAY

Post Office Address

City

WARREN

State

NJ

ZIP

07059

Country

U.S.A.

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

ASHIT K.

GANGULY

Inventor's
Signature

Date

Residence: City

UPPER MONTCLAIR

State

NJ

Country

U.S.A.

Citizenship

U.S.A.

Post Office Address

96 COOPER AVENUE

Post Office Address

City

UPPER MONTCLAIR

State

NJ

ZIP

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Country

U.S.A.

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

ZIP

Country

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
 Page 1 of 1

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

MARGUERITA

LIM-WILBY

Inventor's
Signature

Date

Residence: City

LA JOLLA

State

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Country

U.S.A.

Citizenship

MALAYSI

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Post Office Address

City

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State

CA

ZIP

92037

Country

U.S.A.

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

ZIP

Country

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	IN01157K
	First Named Inventor	SAKSENA, et al
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	July 19, 2001
	Group Art Unit	To Be Assigned
	Examiner Name	To Be Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NOVEL PEPTIDES AS NS3-SERINE PROTEASE INHIBITORS OF HEPATITIS C VIRUS

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

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Signature

Date

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Date

July 19, 2001

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DECLARATION — Utility or Design Patent Application

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number 24265 OR ☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 24265 OR ☐ Correspondence address below

Name	PALAIYUR S. KALYANARAMAN			Reg. No.	34,634
Address					
Address					
City		State		ZIP	
Country		Telephone	(908) 298-5068	Fax	(908) 298-5388

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle if any)	Family Name or Surname
ANIL K.	SAKSENA

Inventor's Signature	Date
Residence: City	UPPER MONTCLAIR State NJ Country U.S.A. Citizenship U.S.A.
Post Office Address	53 BEVERLEY ROAD
Post Office Address	
City	UPPER MONTCLAIR State NJ ZIP 07043 Country U.S.A.

☒ Additional inventors are being named on the 6 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of ---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
RUSSELL E.		PIKE	
Inventor's Signature			Date
Residence: City	STANHOPE	State	NJ
		Country	U.S.A.
Post Office Address	RD #1, 31 FLORENCE STREET		
Post Office Address			
City	STANHOPE	State	NJ
		ZIP	07874
		Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
STEPHANE L.		BOGEN	
Inventor's Signature			Date
Residence: City	SOMERSET	State	NJ
		Country	U.S.A.
Post Office Address	13 DAHLIA ROAD		
Post Office Address			
City	SOMERSET	State	NJ
		ZIP	08873
		Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
YI-TSUNG		LIU	
Inventor's Signature			Date
Residence: City	MORRIS TOWNSHIP	State	NJ
		Country	U.S.A.
Post Office Address	34 ALEXANDRIA ROAD		
Post Office Address			
City	MORRIS TOWNSHIP	State	NJ
		ZIP	07960
		Country	U.S.A.

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 4 of 7

Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name (first and middle (if any))					Family Name or Surname										
ASHOK					ARASAPPAN										
Inventor's Signature								Date							
Residence: City		BRIDGEWATER		State		NJ		Country		U.S.A.		Citizenship		INDIA	
Post Office Address		18 LARSEN COURT													
Post Office Address															
City		BRIDGEWATER		State		NJ		ZIP		08807		Country		U.S.A.	
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name (first and middle (if any))					Family Name or Surname										
TEJAL					PAREK										
Inventor's Signature								Date							
Residence: City		MOUNTAIN VIEW		State		CA		Country		U.S.A.		Citizenship		INDIA	
Post Office Address		1885 EDNAMARY WAY, UNIT C													
Post Office Address															
City		MOUNTAIN VIEW		State		CA		ZIP		94040		Country		U.S.A.	
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor															
Given Name (first and middle (if any))					Family Name or Surname										
PATRICK A.					PINTO										
Inventor's Signature								Date							
Residence: City		MORRIS PLAINS		State		NJ		Country		U.S.A.		Citizenship		U.S.A.	
Post Office Address		34 BATTLE RIDGE ROAD													
Post Office Address															
City		MORRIS PLAINS		State		NJ		ZIP		07950		Country		U.S.A.	

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 7

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
F. GEORGE				NJOROGE			
Inventor's Signature				Date			
Residence: City	WARREN	State	NJ	Country	U.S.A.	Citizenship	KENYA
Post Office Address	11 SOFTWOOD WAY						
Post Office Address							
City	WARREN	State	NJ	ZIP	07059	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
ASHIT K.				GANGULY			
Inventor's Signature				Date			
Residence: City	UPPER MONTCLAIR	State	NJ	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	96 COOPER AVENUE						
Post Office Address							
City	UPPER MONTCLAIR	State	NJ	ZIP	07043	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 6 of 7

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
TERENCE K.				BRUNCK			
Inventor's Signature	<i>Terence K. Brunck</i>					Date	16 July 01
Residence: City	SANTA FE	State	NM	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 5A CALLE SAN MARTIN							
Post Office Address							
City	SANTA FE	State	NM	ZIP	87501	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
SCOTT JEFFREY				KEMP			
Inventor's Signature						Date	
Residence: City	SAN DIEGO	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 7873 AVENIDA NAVIDAD #263							
Post Office Address							
City	SAN DIEGO	State	CA	ZIP	92122	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
ODILE ESTHER				LEVY			
Inventor's Signature						Date	
Residence: City	SAN DIEGO	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 5304 RUETTE DE MER							
Post Office Address							
City	SAN DIEGO	State	CA	ZIP	92130	Country	U.S.A.

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
MARGUERITA				LIM-WILBY			
Inventor's Signature						Date	
Residence: City	LA JOLLA	State	CA	Country	U.S.A.	Citizenship	MALAYSI
Post Office Address 6333 CASTENJON DRIVE							
Post Office Address							
City	LA JOLLA	State	CA	ZIP	92037	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	IN01157K
	First Named Inventor	SAKSENA, et al
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	July 19, 2001
	Group Art Unit	To Be Assigned
	Examiner Name	To Be Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NOVEL PEPTIDES AS NS3-SERINE PROTEASE INHIBITORS OF HEPATITIS C VIRUS

the specification of which ☒ is attached hereto (Title of the Invention)

OR
☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	YES NO
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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Date July 19, 2001

00909052-071901

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input checked="" type="checkbox"/> Customer Number	24265	Place Customer Number Bar Code Label here
<input type="checkbox"/> Registered practitioner(s) name/registration number listed below		

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 24265 OR ☐ Correspondence address below

Name	PALAIYUR S. KALYANARAMAN			Reg. No.	34,634
Address					
Address					
City		State		ZIP	
Country		Telephone	(908) 298-5068	Fax	(908) 298-5388

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
ANIL K.		SAKSENA	
Inventor's Signature		Date	
Residence: City	UPPER MONTCLAIR	State	NJ
Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	53 BEVERLEY ROAD		
Post Office Address			
City	UPPER MONTCLAIR	State	NJ
ZIP	07043	Country	U.S.A.

☒ Additional inventors are being named on the 6 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Please type a plus sign (+) inside this box → ☐

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 7

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

RUSSELL E.

PIKE

Inventor's
Signature

Date

Residence: City

STANHOPE

State

NJ

Country

U.S.A.

Citizenship

U.S.A.

Post Office Address

RD #1, 31 FLORENCE STREET

Post Office Address

City

STANHOPE

State

NJ

ZIP

07874

Country

U.S.A.

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

STEPHANE L.

BOGEN

Inventor's
Signature

Date

Residence: City

SOMERSET

State

NJ

Country

U.S.A.

Citizenship

FRANCE

Post Office Address

13 DAHLIA ROAD

Post Office Address

City

SOMERSET

State

NJ

ZIP

08873

Country

U.S.A.

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

YI-TSUNG

LIU

Inventor's
Signature

Date

Residence: City

MORRIS TOWNSHIP

State

NJ

Country

U.S.A.

Citizenship

U.S.A.

Post Office Address

34 ALEXANDRIA ROAD

Post Office Address

City

MORRIS
TOWNSHIP

State

NJ

ZIP

07960

Country

U.S.A.

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+

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 7

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
ASHOK				ARASAPPAN			
Inventor's Signature						Date	
Residence: City	BRIDGEWATER	State	NJ	Country	U.S.A.	Citizenship	INDIA
Post Office Address 18 LARSEN COURT							
Post Office Address							
City	BRIDGEWATER	State	NJ	ZIP	08807	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
TEJAL				PAREK			
Inventor's Signature						Date	
Residence: City	MOUNTAIN VIEW	State	CA	Country	U.S.A.	Citizenship	INDIA
Post Office Address 1885 EDNAMARY WAY, UNIT C							
Post Office Address							
City	MOUNTAIN VIEW	State	CA	ZIP	94040	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
PATRICK A.				PINTO			
Inventor's Signature						Date	
Residence: City	MORRIS PLAINS	State	NJ	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 34 BATTLE RIDGE ROAD							
Post Office Address							
City	MORRIS PLAINS	State	NJ	ZIP	07950	Country	U.S.A.

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 2 of 2

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor																													
Given Name (first and middle (if any))										Family Name or Surname																													
F. GEORGE										NJOROGE																													
Inventor's Signature										Date																													
Residence: City					WARREN					State					NJ					Country					U.S.A.					Citizenship					KENYA				
Post Office Address										11 SOFTWOOD WAY																													
Post Office Address																																							
City					WARREN					State					NJ					ZIP					07059					Country					U.S.A.				
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor																													
Given Name (first and middle (if any))										Family Name or Surname																													
ASHIT K.										GANGULY																													
Inventor's Signature										Date																													
Residence: City					UPPER MONTCLAIR					State					NJ					Country					U.S.A.					Citizenship					U.S.A.				
Post Office Address										96 COOPER AVENUE																													
Post Office Address																																							
City					UPPER MONTCLAIR					State					NJ					ZIP					07043					Country					U.S.A.				
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor																													
Given Name (first and middle (if any))										Family Name or Surname																													
Inventor's Signature										Date																													
Residence: City										State										Country										Citizenship									
Post Office Address																																							
Post Office Address																																							
City										State										ZIP										Country									

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 6 of 7

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
TERENCE K.				BRUNCK			
Inventor's Signature						Date	
Residence: City	SANTA FE	State	NM	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	5A CALLE SAN MARTIN						
Post Office Address							
City	SANTA FE	State	NM	ZIP	87501	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
SCOTT JEFFREY				KEMP			
Inventor's Signature						Date	
Residence: City	SAN DIEGO	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	7873 AVENIDA NAVIDAD #263						
Post Office Address							
City	SAN DIEGO	State	CA	ZIP	92122	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
ODILE ESTHER				LEVY			
Inventor's Signature						Date	
Residence: City	SAN DIEGO	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	5304 RUETTE DE MER						
Post Office Address							
City	SAN DIEGO	State	CA	ZIP	92130	Country	U.S.A.

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 7 of 7

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

MARGUERITA

LIM-WILBY

Inventor's
Signature

Marguerita Lim-Wilby

Date

7/16/01

Residence: City

LA JOLLA

State

CA

Country

U.S.A.

Citizenship

Malaysi
A

Post Office Address

6333 CASTENJON DRIVE

Post Office Address

City

LA JOLLA

State

CA

ZIP

92037

Country

U.S.A.

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

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Given Name (first and middle (if any))

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

ZIP

Country

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☒ Declaration
Submitted
with Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number IN01157K

First Named Inventor SAKSENA, et al

COMPLETE IF KNOWN

Application Number /

Filing Date July 19, 2001

Group Art Unit To Be Assigned

Examiner Name To Be Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (If only one name is listed below) or an original, first and joint inventor (If plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**NOVEL PEPTIDES AS NS3-SERINE PROTEASE INHIBITORS OF HEPATITIS
C VIRUS**

the specification of which (Title of the invention)

☒

is attached hereto

OR

☐

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(If applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	YES NO
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority date sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority date sheet PTO/SB/02B attached hereto.

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Date

July 19, 2001

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input checked="" type="checkbox"/> Customer Number 24265	→ Place Customer Number Bar Code Label here
<input type="checkbox"/> Registered practitioner(s) name/registration number listed below	

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 24265 OR ☐ Correspondence address below

Name	PALAIYUR S. KALYANARAMAN			Reg. No.	34,634
Address					
Address					
City		State		ZIP	
Country	Telephone	(908) 298-5068	Fax	(908) 298-5388	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle if any)		Family Name or Surname	
ANIL K.		SAKSENA	
Inventor's Signature		Date	
Residence: City	UPPER MONTCLAIR	State	NJ
		Country	U.S.A.
Citizenship	U.S.A.		
Post Office Address	53 BEVERLEY ROAD		
Post Office Address			
City	UPPER MONTCLAIR	State	NJ
		ZIP	07043
		Country	U.S.A.
<input checked="" type="checkbox"/> Additional inventors are being named on the 6 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto			

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
RUSSELL E.		PIKE			
Inventor's Signature				Date	
Residence: City	STANHOPE	State	NJ	Country	U.S.A.
				Citizenship	U.S.A.
Post Office Address RD #1, 31 FLORENCE STREET					
Post Office Address					
City	STANHOPE	State	NJ	ZIP	07874
				Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
STEPHANE L.		BOGEN			
Inventor's Signature				Date	
Residence: City	SOMERSET	State	NJ	Country	U.S.A.
				Citizenship	FRANCE
Post Office Address 13 DAHLIA ROAD					
Post Office Address					
City	SOMERSET	State	NJ	ZIP	08873
				Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
YI-TSUNG		LIU			
Inventor's Signature				Date	
Residence: City	MORRIS TOWNSHIP	State	NJ	Country	U.S.A.
				Citizenship	U.S.A.
Post Office Address 34 ALEXANDRIA ROAD					
Post Office Address					
City	MORRIS TOWNSHIP	State	NJ	ZIP	07960
				Country	U.S.A.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/02A (3-97)

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a required to respond to a collection of information unless it contains a

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page 4 of 7

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
ASHOK				ARASAPPAN			
Inventor's Signature				Date			
Residence: City	BRIDGEWATER	State	NJ	Country	U.S.A.	Citizenship	INDIA
Post Office Address		18 LARSEN COURT					
Post Office Address							
City	BRIDGEWATER	State	NJ	ZIP	08807	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
TEJAL				PAREK			
Inventor's Signature				Date			
Residence: City	MOUNTAIN VIEW	State	CA	Country	U.S.A.	Citizenship	INDIA
Post Office Address		1885 EDNAMARY WAY, UNIT C					
Post Office Address							
City	MOUNTAIN VIEW	State	CA	ZIP	94040	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
PATRICK A.				PINTO			
Inventor's Signature				Date			
Residence: City	MORRIS PLAINS	State	NJ	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address		34 BATTLE RIDGE ROAD					
Post Office Address							
City	MORRIS PLAINS	State	NJ	ZIP	07950	Country	U.S.A.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>7</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
F. GEORGE				NJOROGE			
Inventor's Signature						Date	
Residence: City	WARREN	State	NJ	Country	U.S.A.	Citizenship	KENYA
Post Office Address 11 SOFTWOOD WAY							
Post Office Address							
City	WARREN	State	NJ	ZIP	07059	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
ASHIT K.				GANGULY			
Inventor's Signature						Date	
Residence: City	UPPER MONTCLAIR	State	NJ	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 96 COOPER AVENUE							
Post Office Address							
City	UPPER MONTCLAIR	State	NJ	ZIP	07043	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 0 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
TERENCE K.				BRUNCK			
Inventor's Signature					Date		
Residence: City	SANTA FE	State	NM	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 5A CALLE SAN MARTIN							
Post Office Address							
City	SANTA FE	State	NM	ZIP	87501	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
SCOTT JEFFREY				KEMP			
Inventor's Signature		<i>Scott Kemp</i>			Date		7/16/01
Residence: City	SAN DIEGO	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 7873 AVENIDA NAVIDAD #263							
Post Office Address							
City	SAN DIEGO	State	CA	ZIP	92122	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
ODILE ESTHER				LEVY			
Inventor's Signature		<i>Odile Levy</i>			Date		7/18/01
Residence: City	SAN DIEGO	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 5304 RUETTE DE MER							
Post Office Address							
City	SAN DIEGO	State	CA	ZIP	92130	Country	U.S.A.

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ADDITIONAL INVENTOR(S) Supplemental Sheet

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
MARGUERITA		LIM-WILBY	
Inventor's Signature		Date	
Residence: City	LA JOLLA	State	CA
		Country	U.S.A.
Citizenship	A		MALAYSI
Post Office Address 6333 CASTENJON DRIVE			
Post Office Address			
City	LA JOLLA	State	CA
		ZIP	92037
		Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Post Office Address			
Post Office Address			
City		State	
		ZIP	
		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Post Office Address			
Post Office Address			
City		State	
		ZIP	
		Country	

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